



MEMBERSHIP

Application

www.huntsvillehospitality.org

Application for Membership

PO Box 322
Huntsville, AL 35804
www.huntsvillehospitality.org

(Please print legibly)

Property Name: _____

Chain or Brand: _____

Contact Person: _____ Title: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Ext _____

Company Website: _____

Mailing Address (if different from location address)

Email Address- Main Contact: _____

Additional Contact Email: _____

Hospitality Industry Segment	
<input type="checkbox"/> Lodging	<input type="checkbox"/> Travel/ Tourism
<input type="checkbox"/> Restaurant	<input type="checkbox"/> Allied Industry

Membership Dues are not deductible as charitable contributions for income tax purposes.
Dues are ordinary and necessary business expenses.

Membership is by calendar year and the Annual Fee is \$200 per organization/ business.

(Only Restaurants that are members of the Association may enter the "Taste of Huntsville")

I subscribe to the purpose and mission of the Huntsville Madison County Hospitality Association. Enclosed are my dues for the calendar year of 20_____.

Membership Dues do not include the monthly luncheon cost. Luncheons are \$20.00 per person and are due at the time of the meeting.

Please Make Checks Payable To
The Huntsville Madison County Hospitality Association (HMCHA)
PO Box 322 Huntsville, AL 35804

For Office Use Only
Date Received: _____
Member Info Updated: _____